Secretary of State's Office Education and Training Request Form

Instructions: Leave or expenses granted for education or training not required by the employer should be in proportion to the benefits to the agency and may range from no leave and no expenses paid to full leave and full expenses paid. Employees requesting employer supported education or training must complete the first ten items and forward the form to their supervisor(s) for review and approval. Supervisors are to recommend approval or denial, indicate level of agency support and forward the request up through the chain of command. Approval by the appropriate bureau deputy is required for all requests. The Chief Deputy's approval is required for any out-of-state training. A copy of the completed form is to be forwarded to the Personnel Office for placement in the employee's personnel file.

| A. EMPLOYEE REQUEST | |
|--|---|
| 1. Employee's name: | Date: |
| Describe nature of education or training and the borochure, if available. | benefits to yourself and to the agency. Attach copy of announcement or |
| | |
| 3. Specify the location, dates and times of the traini | ng or education |
| describe how you propose to account for the missed | will be missed due to attendance at the requested education or training and work time. (Employees may be allowed leave with pay, leave without pay, use of accumulated their normal work hours in order to make lost work time to attend approved training. |
| 5. What is the cost of the requested education or tra | ining, including travel, and what expenses do you request that the employer pay |
| | cluding travel, result in an overtime or compensatory time situation? If so compensatory time that may be earned, if approved. |
| 7. If the education or training request is approved in you will therefore not be eligible to earn compensate | n whole or in part, do you agree that your attendance is purely voluntary and that ory time or overtime as a result of such attendance? |
| | requested education or training, are you willing to enter into an agreement that fied period or be required to reimburse the agency for the amount of money |
| | penses for education or training is conditioned upon successful completion and or money received if you do not successfully complete the |
| 10. Describe the type, dates, and cost of other education | ation or training paid for by this agency in the last 3 years. |
| | |

11. Provide any additional information, requirements, or deadlines regarding the training request

B. SUPERVISOR'S RECOMMENDATION

| 1. What is your recommendation regarding the requested support for training or education? | | | | |
|---|---|---|--|--|
| | Approval | Disapproval | Partial Approval (circle one) | |
| If disapproved, describe the reasons for denying the request. | | | | |
| If approved, please provide to | he additional infor | mation requested | in questions 2-6. | |
| whether the education or train the education or training will | ning is necessary t improve job perfo als; d) the cost of t | o enable the empormance; c) the eache training to the | sted training or education to the agency? Address such factors as: a) loyee to accomplish performance objectives; b) the likelihood that stent to which the education or training will contribute to meeting agency; and e) whether the training or education may be provided in | |
| 3. How much, if any, of the | cost of the training | g do you recomm | end be paid for by the agency? | |
| | | | | |
| | | | if any, do you recommend be approved to allow for attendance at the lours that you are willing to approve. | |
| | | | upon successful completion of coursework as defined as receipt of a cribe how you will define successful completion. | |
| | the agency's supp | ort for the trainir | agreement that he/she will continue to work for the agency for a g or education or pay back the money received? If so, specify the to work? | |
| C. BUREAU DEPUTY | Approval | Disapproval | Partial Approval (circle one) | |
| Signature Explanatory comments: | | | Date | |
| D. CHIEF DEPUTY | Approval | Disapproval | Partial Approval (circle one) | |
| Signature Explanatory comments: | | | Date | |